LAW OFFICES OF BRIAN S. STEINBERGER, P. A.

Registered Patent Attorneys
101 Brevard Avenue Cocoa, Florida 32922
Phone (321) 633-5080 Fax (321) 633 0000

Steinberger (Member El Da 5

an S. Steinberger (Member FL, PA Bars)* Roland Dexter (Member TX, MA Bars)* Joyce P. Morlin (Member FL, MI, IN, NY Bars)* of Counsel Frances L. Olmsted (Member NY Bar)* Registered Patent Attorney

Assistant Commissioner for Patents P O Box 1450 Alexandria, VA 22313-1450

Application: PRESEALED SYSTEM First named inventor: DARRELL PRICE

Serial Number: 10/039,695

Filed: 01/04/02

Attorney Docket No.: PC-1228

RECEIVED JUL 29 2003 **IGROUP 3600**

Honorable Commissioner:

Enclosed is a check covering the additional claims fee for the above application totaling \$42.00, along with a copy of the Informality re payment of fee notice for the above captioned patent application?

Please enter the fee in connection with the amendment filed on 6/24/03. A return post card is also enclosed.

Respectfully submitted,

Brian S. Steinberger Registration No. 36,423

I certify that this correspondence, including the attachments listed, is being deposited with the United States Postal Service, in an envelope addressed to Assistant Commissioner for Patents, P O Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Date of Mailing Signature of Person Mailing



United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Adress COMMISSIONER FOR PATENTS PO. Box 1450 Alexandria, Vinnia 22313-1450

PPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 0/039.695 01/04/2002 PC-1228 Darrell Price 5672 . 07/10/2003 AW OFFICES OF BRIAN S STEINBERGER **EXAMINER** 01 BREVARD AVENUE CHAPMAN, JEANETTE E COCOA, FL 32922 ART UNIT PAPER NUMBER 3635

Please find below and/or attached an Office communication concerning this application or proceeding.

JUL 2 2 2003 GROUP 3600

DATE MAILED: 07/10/2003





UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

SERIAL NUMBER	FILING DATE	ATTORNEY DOCKET NO.		
·				
_		٦		EXAMINER
		·	İ	
			ART UNIT	PAPER NUMBER
		•		
			DATE MAILED:	
				•
INFO	RMALITY RE PA	YMENT OF FEE		
informality rega d0-24-	rding the payme -03 is i	nt of the fee in connection with the ndicated below.	ne original filir	ig fee the amendme
FEE DUE	•			
The amendme	nt is considered	incomplete in that the funds in Deposit	Account No	
are insufficie	nt to cover the e	ntire fee due. The balance is due withir	the period set	below,
within the pe The amendment Account) the	riod set below. ent has not beer fee as indicate	the attached Patent Application Fee De entered, since applicant has failed to d on the attached Patent Application F e period set below.	remit (or auth	orize charge to a Depos
•	•	submitted in this applicatio	n is insufficien	•
The filing fee			n is magnificien	RECEIV
. A balance of	s <u>92,0</u>	O is due for additional claims.		JUL 2 9_200
				GROUP 30
OR C	NE (I) MONTH	N THE REMAINDER OF THE SET PEFROM THE DATE OF THIS LETTER, WE MIT THE FEE OF \$		
EXCESS PAYMEN	T:			
		is in excess of the amoun		cover the claims now i
This matter o	of refund or credi	t to your account is being referred to the	Finance Office	er, for his consideration
		A /	\ .	

	\Box
	M
	C
:	m
	m
	O

Eth. 28							Applica	tion or	Docket No	age to the		
	PATENT APPLICATION EE DETERMINATION RECO											
Effective October 1, 2001								10039695				75
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY									R THAN			
TOTAL CLAIMS				2	(00)	um zj	1	RATE		1 		ENTITY
FOR			NUMBE	R FILED	NHM	BER EXTRA		BASIC F			RATE	FEE
TOTAL CHARGEABLE CLAIMS			1 06	ninus 20=	*	<u>Z</u>		X\$ 9=	1		BASIC FEI	F 740.00
INDEPENDENT CLAIMS			100	ninus 3 =	*	0			┪—	— OF		
MULTIPLE DEPENDENT CLAIM PR								X42=	-	OF	X84=	
* If the difference in column 1 is less than zero, enter				"O" in	column 2		+140=		OF	+280=		
						Widilii 2		TOTAL	4/5	od a	TOTAL	
		CLAIMS AS ((Column 1)	AMENDE	Colun		(Column 3)		SMALI	_ ENTIT	Y OR		THAN ENTITY
⋖		CLAIMS REMAINING		HIGH NUMI	EST				ADD			ADDI-
AMENDMENT A		AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TION/ FEE		RATE	TIONAL FEE
ENDI	Total	* 19	Minus	+ 2.	5	= .		X\$ 9=		OR	X\$18=	
AM	Independent	* Y ENTATION OF M	Minus	*** 2	CLAIN	= 1		X42=		OR	X84=	
			OCTIF EE DE	PENDENT	CLAIM			+140=	1	OR	+280=	
						•	L	TOTAL		OR	TOTAL	
		(Column 1)		(Colum		(Column 3)	: A	VDDIT. FEE	: !		ADDIT. FEE	P
B		CLAIMS REMAINING		HIGHE			Г		ADDI	7		400.4
MENT		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONA FEE		RATE	TIOTAL
NDM	Total	*	Minus	**	<u> </u>	=		X\$ 9=	1	OR	X\$18=	75 1
AMEND	Independent	*	Minus	***		=	 	X42=	 	1		300
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM		ŀ	<u> </u>		OR	X84=	0
	•						L	+140=		OR	+280=	
		•	•			٠.	Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	·
_		(Column 1) CLAIMS		(Colum		(Column 3)	:-			:		
ပ		REMAINING		HIGHE NUMBI	ER	PRESENT	Γ		ADDI-	7		ADDI-
AEN PEN		AFTER AMENDMENT		PREVIOU PAID FO		EXTRA		RATE	TIONAL FEE	-	RATE	TIONAL FEE
Ž ļ	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	, , ,
AMA	Independent	*	Minus	***		=	H	X42=		1	X84=	
THIS THESENTATION OF MOLTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEEOR ADDIT.												
The Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
RM	PTO-875 (Pay 8/0	4		·		· .	7		11.	•		